

OFFICE OF ZONING AND ADMINISTRATIVE HEARINGS  
MONTGOMERY COUNTY, MARYLAND

100 Maryland Avenue, Room 200

Rockville, Maryland, 20850

(240) 777-6660

{Form Revised 10-7-14}

OZAH No. CU-17-14  
Date Certified Complete  
Date Filed 4/4/17  
Hearing Date  
Time

APPLICATION FOR CONDITIONAL USE (OTHER THAN AN ACCESSORY APARTMENT)

(Please note instructions on reverse side. Application cannot be processed unless all information is submitted)

Application is hereby made for a Conditional Use under the Zoning Ordinance for the Montgomery-Washington Regional District in Montgomery County, Maryland (Chap. 59, Mont. Co. Code 2014) as follows:

Applicant(s) Robin Rice  
Property to be used: Lot 8 Block G Subdivision Mill Creek Towne  
Street Address: 17505 PARK MILL DR City Derwood State MD Zip 20855  
Zone Classification R-200 Tax Account No. 00785383  
Proposed Use Child care

If this Application is for a Day Care Facility, specify the number of children to be cared for 30 Client Children

Zoning Ordinance subsection providing for proposed use: Section 59-3- 4.4  
(in accordance with Section 59-7.3.1)

~~Owner of property:~~ Name Robin Rice  
Address 5913 Wild Flower CT 20855  
DERWOOD, MD

Applicant's present legal interest in above property: (check one)

☒ Owner (including joint ownership) ☐ Lessee ☐ Tenant other than lessee ☒ ~~Contract Purchaser~~  
☐ Other (Describe)

Has any previous application for a special exception or conditional use involving this property been made by this Applicant or by anyone else to this Applicant's knowledge? NO

If so, give Case Number(s):

I have read the instructions on the reverse side of this form, and am filing herewith all of the required accompanying information. I hereby affirm that all of the statements and information contained in or filed with this Application are true and correct.

N/A  
Signature of Attorney - (Please print next to signature)

Address of Attorney

Telephone Number

Email Address

Robin Rice Robin Rice  
Signature of Applicant(s) - (Please print next to signature)

5913 Wild Flower CT  
Address of Applicant(s)

301 963-7190  
Home Telephone Number

240 393-0282  
Work Telephone Number

Conditional Use Annual Billing Information (Please Print)

Name: Robin Rice

Street Address: 5913 Wild Flower CT

City: Derwood

State: MD

Telephone Number: 301 963-7190

Email Address: 2v3000@gmail.com

EXHIBIT NO. 20855  
APPLICATION NO. CU 17-14